Α	nr	٦li	ca	tio	n	or		ocke	t I	Νı	ım	be
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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1)						(Column 2)			SMALL ENTITY TYPE			THAN ENTITY	l
TC	TAL CLAIMS		39					RATE	FEE		RATE	FEE	1
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	1
то	TAL CHARGEA	BLE CLAIMS	6764 min	us 20=	. 47			X\$ 9=		OR	X\$18=	792	
IND	EPENDENT CL	nus 3 =	*			X40=		OR	X80=		ľ		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT								970	ł	
* If	the difference	in column 1 is	less than ze	r "0" in c	olumn 2		+135=		OR	+270=	270	1	
••		LAIMS AS A						TOTAL		OR	TOTAL OTHER	1772	1
	<u>.</u>	(Column 1)	NIVIENDED	(Colu				SMALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	* - * * * * * * * * * * * * * * * * * *	HIGH NUM PREVIO PAID	BER OUSĻY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		١
ME	Independent	*	Minus	***		=		X40=		OR	X80=		1
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM]	+135=		OR	+270=		1
							l	TOTAL			TOTAL		1
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE		1011	ADDIT. FEE		1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	**************************************	HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		I
	Independent	*	Minus	***	- OI ANA	=		X40=		OR	X80=		1
L	FIRST PRESE	OLTIPLE DEF	ENDEN	CLAIM	CLAIM [_]		+135=		OR	+270=		1	
•								TOTAL		OR	TOTAL ADDIT. FEE		1
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			ADDII. FEE		1
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	$\Big] \Big[$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	Ï	
	Independent	*	Minus	***		<u> </u>	┧╽	X40=		OR	X80=		1
Ľ	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDEN	T CLAIM		J ∤	125-			+270=		1
	If the entry in colu	mn 1 is less than t	the entry in colu	ımn 2, writ	e "0" in col	lumn 3.		+135= TOTAL		OR	TOTAL		4
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FE											L	1	